Substitute for form 1449/PTO				Complete if Known		
				Application Number	10/045,632	
INFOR	RMATION DIS	CLOS	URE	Filing Date	October 26, 2001	
STATEMENT BY APPLICANT (Use as many sheets as necessary)				First Named Inventor	Milberger, Susan M.	
				Art Unit	3693	
				Examiner Name	Sara M. Chandler	
Sheet	1	of	1	Attomey Docket Number	020375-000230US	

U.S. PATENT DOCUMENTS					
Examiner Initials*		Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where
		Number Kind Code ^{2 (Fitomer)}	MM-OO-1111	Applicant of Cited Document	Relevant Passages or Relevant Figures Appear

	FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Foreign Patent I	Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)			o rootan gacor ppea	Ė

		NON PATENT LITERATURE DOCUMENTS		
Examiner Cite Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate Initials * No.1 the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), voluntumber(s), publisher, city and/or country where published.				
	C8	US Patent Application No. 10/046,654 (Attorney Docket Number 020375-000220US), Office Action dated January 14, 2009, 12 pages		
*	С9	US Patent Application No. 10/336,149 (Attorney Docket Number 020375-000221US), Office Action dated December 9, 2008, 19 pages		
	C10	US Patent Application No. 10/336,657 (Attorney Docket Number 020375-000222US), Advisory Action dated February 18, 2009, 3 pages		
		US Patent Application No. 10/336,657 (Attorney Docket Number 020375-000222US), Final Office Action dated November 25, 2008, 11 pages		

Examiner Signature	Date Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered, include copy of this form with next communication to applicant.

"Applicants values existent designation number optional," Applicant is to up lace a check mark here if English larguage Translation is attached.